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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	Attorney Docket Number	11443-6
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ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Bereskin & Parr		
Signature			
Printed Name	Jay M. Millman		
Date	January 26, 2005	Reg. No.	52,520

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name			Date

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January 26, 2005

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Our Reference: 11443-006

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

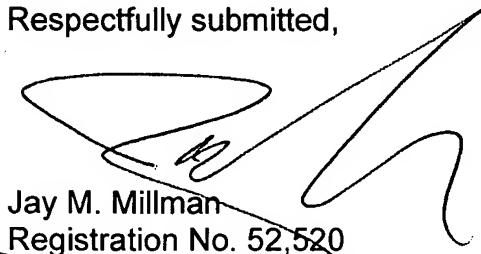
The Commissioner of Patents
& Trademarks
Washington, D.C.
U.S.A 20231

Dear Sir:

Re: United States Patent Application No. 10/811,871
For: IMPROVED PAINTBALL MARKER AND KIT OF PARTS THEREFOR
Filed: March 30, 2004
Applicant: Paul Garfield Jong

In accordance with 37 CFR 1.97 and 1.98, and in recognition of the duty of disclosure set forth in 37 CFR 1.56, the applicant hereby submits an Information Disclosure Statement including (1) a listing of patents and other publications of which it is aware and (2) a copy of each foreign listed item. In accordance with the requirements of 1.97(b)(3), this Information Disclosure Statement is filed before the mailing date of a first Office Action.

Respectfully submitted,


Jay M. Millman
Registration No. 52,520
/tw
Encl.



PTO/SB/08a (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

Approved for use through 07/07/2006. GMB 0501-0601
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Sheet 1 of 2

Complete if Known	
Application Number	10/811,871
Filing Date	March 30, 2004
First Named Inventor	Paul Garfield Jong
Art Unit	
Examiner Name	
Attorney Docket Number	11443-6

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature		Date Considered	
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PTO/SB/08b(08-03)

Approved for use through 07/31/2006. OMB 0651-0031

Approved for use through 07/01/2006. GMD 9050-0001

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Substitute for form 1449B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Shee

of 2

<i>Complete if Known</i>	
<i>Application Number</i>	10/811,871
<i>Filing Date</i>	March 30, 2004
<i>First Named Inventor</i>	Paul Garfield Jong
<i>Art Unit</i>	
<i>Examiner Name</i>	
<i>Attorney Docket Number</i>	11443-6

NON PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.